<u>Section 9 – Reporting Requirements</u>

9-1. Reports to the Relocating Employee.

Reports required to be furnished to the relocating employee are described as part of and in conjunction with those detailed in the paragraph entitled Reports to the RTO.

9-1.1. Pre-move Survey Report. [old I9.2]

A copy of the survey that is signed and dated by the estimator, indicating the total estimated net weight of the shipment, will be given to the <u>property</u> <u>owner</u> or his/her agent upon completion of the pre-move survey.

9-2. Reports to the RTO.

9-2.1. Weight Variance.

9-2.1.1. Notification.

In the event the actual shipment weight is greater than 115% of the pre-move survey weight, the Participant must notify the RTO or its third party representative of the original weight prior to billing the Federal Agency and be prepared to justify the difference.

9-2.1.2. Failure to Notify RTO of Weight Variance.

In the event the Participant fails to notify the RTO or third party representative, the Participant stipulates that the agreed weight of the shipment will be 115% of the pre-move survey weight.

9-2.1.3. Failure to Justify Weight Variance.

In the event the Participant fails to adequately justify the difference between the actual and pre-move survey weights, the Participant stipulates that the agreed weight of the shipment will be 115% of the pre-move survey weight. The agreed weight shall take precedence over the actual weight for the assessment of transportation, accessorial, and storage-in-transit charges when based on weight. The RTO has the authority to waive this provision.

9-2.1.4. Actual Weight In Excess of Employee's Authorized Allowance. - International Only.

9-2.1.4.1. General. [old I9.3]

Prior to moving any shipment from the origin warehouse, the RTO must be advised, if he/she so requires, of the actual net weight of the shipment. If the shipment weighs in excess of the employee's authorized allowance, the RTO will notify the Participant when it may move the shipment. This time will not be counted against the Participant in calculating its RDD compliance, and payment will be authorized for any SIT at origin.

9-2.1.4.2. Failure To Notify the Responsible Transportation Officer. [old I9.3]

In the event that the RTO requires notification of overweight shipments, and the Participant fails to notify the RTO in accordance with his/her instructions, and moves the shipment from origin to destination, the Participant may collect from the Government for transportation and accessorial service charges, including terminal services, only an amount equal to the charges accruing to the authorized shipment weight. In this instance, the Participant may not collect anything from the relocating employee for the excess weight.

9-2.2. Unusual Incidents Report.

9-2.2.1. Content Of Report. [old D9-1]

In the event of incidents of major significance which produce substantial loss, damage, or delay, such as strikes, embargoes, fires, pilferage, vandalism, and similar incidents, the Participant must submit to the RTO by electronic transmission (TELEX, facsimile, or other electronic format acceptable to the shipping Federal agency) the following information on each shipment involved:

1) Type of incident;
2) Location of incident;
3) Last name, first name, and middle initial of employee;
4) GBL number and date issued;
5) RTO (both origin and destination);

6) Origin;

7) Destination;

8) Date shipment received by Participant;

9) Required delivery date;

10) Date and time of incident or discovery thereof;

11) Estimated amount of loss and extent of damage;

12) Current status of shipment, including new estimated time of arrival (ETA);

13) Location of shipment(s), if applicable, including port and pier location and date vessel arrived or warehouse location, plus the serial number and name of the owner of the sea container (s); and

14) Name of ship, if appropriate.

9-2.2.2. After Action Report. [old D9-1]

The Participant will furnish the RTO an after action report which provides a final assessment of the loss or damage incurred, delays encountered, and final disposition of the household goods.

9-2.3. Delays Report. [old D9-4]

When, for any reason, a Participant finds it impossible to meet the scheduled pickup date or the required delivery date, the RTO, and if practicable, the owner, will be notified. Neither the Government nor the relocating employee will be responsible for additional charges assessed on any shipment a Participant or its agent holds for any reason unless specific written approval has been obtained from the RTO.

9-2.4. Storage-In-Transit Location Report. [old D9-2]

For shipments delivered to Storage-in-transit (SIT) the Participant shall notify the RTO in writing, by facsimile, or similar electronic means, of the name, address, and telephone number of the warehouse in which the shipment has been placed, and shall make and keep a record of such notification. If a change in warehouse location is effected during the SIT period, the RTO and the property owner must be notified of the change in location and the new telephone number within the timeframe specified in DTOS Paragraph 5-3 & ITOS Paragraph 5.11.

9-2.5. Sit Pickup/Delivery Report. - International Only. [old I9.10]

Upon request of the RTO, the Participant will provide information on the afternoon preceding scheduled pickup/delivery as to whether the SIT pickup or delivery will be performed in the morning (0800 to 1200) or in the afternoon (1200 to 1700) of the following day.

9-2.6. Use Of DD Forms 1840 and 1840R.

9-2.6.1. General. [old I9.5]

If use of DD Forms 1840, Joint Statement of Loss or Damage at Delivery, and 1840R, Notice of Loss or Damage, are required by the shipping Federal agency, the procedures and Participant responsibilities covering the use of DD Form 1840and DD Form 1840R are outlined below.

9-2.6.2. Use of DD Form 1840 and 1840R in lieu of DD Form 619. [old I9.5]

DD Form 1840 and 1840R will be used in lieu of the loss and damage portions of DD Form 619.

9-2.6.3. Completion. [old I9.5]

9-2.6.3.1.   Section A. [old I9.5]

Complete Section A of the DD Form 1840 and make all five (5) copies available upon delivery.

9-2.6.3.2.   Section B. [old I9.5]

In conjunction with employee, annotate all loss and/or damage in Section B on all five (5) copies of the DD Form 1840.

9-2.6.4. Distribution. [old I9.5]

9-2.6.4.1.   To The Employee. [old I9.5]

Provide the employee with three (3) copies of the completed DD Form 1840 signed by both the Participant's representative and employee.

9-2.6.4.2.   To The Responsible Transportation Officer. [old I9.5]

Provide the destination RTO a copy of DD Form 1840 within thirty (30) workdays of delivery.

9-2.7. Agency Shipment Reports. [old I9.9]

9-2.7.1. Shipment Report. - International Only. [old I9.9]

Within not more than five (5) calendar days following date of pickup of a shipment in either CONUS or overseas, the origin agent will provide the following information to the RTO: (1) Employee's Name; (2) Shipment GBL Number; (3) Pieces, Net Weight, Gross Weight and Cube; (4) Estimated date shipment will be picked up by line-haul equipment for movement to the ocean port; (5) Estimated date of sailing and identity of port and vessel; (6) Routing of vessel and discharge port; and (7) Estimated date of arrival at destination.

9-2.7.2. Notice Of Shipment Arrival. [old I9.9]

Participant will notify the RTO within one workday of shipment's arrival at agent's facility, and advise of the shipment's first available delivery date.

9-2.7.2.1.   On A Normal Workday. [old I9.9]

When a shipment arrives at destination on a normal workday, the Participant will notify the RTO before delivery/attempted delivery of household effects to the residence in accordance with the instructions specified on the shipping Federal agency GBL.

9-2.7.2.2.   On Other Than A Normal Workday. [old I9.9]

In the event the shipment arrives at the destination on a weekend or holiday, the Participant will contact the RTO to ascertain if delivery can be made.

9-2.7.2.3.   Arrival Prior To RDD. [old I9.9]

For shipments that arrive prior to the RDD, Participant will deliver to the employee or employee's agent prior to the RDD.

9-2.7.2.4.   Arrival After The RDD. [old I9.9]

For shipments that arrive after the RDD, the Participant will deliver in accordance with the instructions or within two workdays after notifying the destination GSO or the shipping Federal agency Transportation Division, as appropriate, of the shipment's arrival.

9-2.7.3. Late Delivery. [old I9.9]

When the Participant knows for any reason it will be impossible for it to have the shipment at destination on or before the RDD, the Participant will notify the RTO at the earliest practicable time, advising it of the last known location of the shipment and furnishing an estimate of the delay expected beyond the RDD. An electronic communication or facsimile will be utilized in notifying the RTO and the Participant, ensuring that the notification reaches the appropriate RTO before expiration of the RDD. At a minimum, the following information will be provided: (1) Last name, first name, middle initial, and SSN of the employee; (2) Origin and destination of the shipment; (3) GBL number and RDD; and (4) Last known location of the shipment and new ETA at destination.

9-2.7.4. Report Of Shipments On Hand. - International Only. [old I9.9]

If required by the RTO, the Participant will provide a weekly report of all of its shipments (except shipments in Storage-in-Transit) on hand which were picked up from an employee's residence as well as from its agent's facilities before the previous Wednesday. The report will reflect the date, the employees' names, the shipping Federal agency GBL numbers, pickup date, Participant code and RDD. Negative reports are required.

9-2.7.5. Participant Error In Shipment. [old I9.9]

The Participant will report to the RTO any instances in which the Participant ships all or a portion of the wrong property or in which all or a portion of a shipment is sent to the wrong destination.

9-2.8. Commercial Port Level Report. - International Only. [old I9.7]

Unless otherwise required by the RTO, the Participant shall submit to the shipping Federal agency and the US Dispatch Agents during the period May through September of each year a commercial port agent report showing a weekly summary of the total number of personal property shipments on hand at commercial ports for the preceding week. Reports must be submitted by FAX. See ITOS Section 15 for specific report format.

9-2.9. Ocean Terminal Port Agents. - International Only.

9-2.9.1. Submission Of Port Agent Rosters. - International Only. [old I9.15]

If required by a Federal agency shipping pursuant to this HTOS, the Participant will submit copies of the ocean terminal port agent rosters in the following manner: (1) Three (3) copies of the rosters of CONUS ocean terminal port agents to the shipping Federal agency; and (2) Five (5) copies of the rosters of overseas ocean terminal port agents to the shipping Federal agency.

9-2.9.2. Updating The Port Agent Roster. - International Only. [old I9.15]

If Participants are required to submit ocean terminal port agent rosters in accordance with the above, the Participants will update the ocean terminal port agent rosters annually. Changes in the names, locations, and telephone numbers will be submitted as they occur to the shipping Federal agency.

9-3. Reports to the PMO.

9-3.1. Claim Settlement and Shipment Reports.

9-3.1.1. Claim Settlement Reports. [old D9-3]

In accordance with the reporting periods specified in DTOS Paragraph 5-9D and ITOS Paragraph 5.19.6, Participants shall furnish to the PMO a quarterly report of claims settled during the calendar quarter on shipments handled pursuant to this HTOS. For the purposes of this reporting requirement, the reportable claim settlement is the first offer (full payment, partial payment, or full denial) made by the Participant.

9-3.1.1.1.   Claim Report Content & Format Requirements.

Such report shall contain information identified in HTOS Paragraph 9-3.2.2.6 for electronic submission requirements. For purposes of this requirement, the content should identify all first proviso household goods claims, claims for POV's and UAB claims handled pursuant to this HTOS. This provision applies to both domestic and international shipments.

9-3.1.2. Shipment Reports. [old D9-5]

The Participant shall furnish to the PMO by electronic filing, a quarterly report of shipments billed to the applicable Federal Agency during the quarter on shipments handled pursuant to this HTOS. Only those shipments billed for which the GSA Industrial Funding Fee (IFF) is applicable will be included in the shipment reports. For purposes of this report, the date of submission of the Public Voucher for Transportation Charges, SF1113, (billing date) is the determining date.

9-3.1.2.1.   Shipment Report Content & Format Requirements.

Such report shall contain information identified in HTOS Paragraph 9-3.2.2.2 for electronic submission requirements. For purposes of this requirement, the content should identify all first proviso household goods shipments, POV's and UAB handled pursuant to this HTOS. This provision applies to both domestic and international shipments.

9-3.1.3. Report Deficiencies. - Shipment, Claim Reporting.

9-3.1.3.1.   Shipment and Claim Reports.

The PMO will notify the Participant of any shipment or claim report deficiency. If a Participant's report is submitted by a Service Provider, the Provider will be notified of the deficiency, not the Participant. Failure to correct deficiencies in either the shipment and/or claim report will result in an incomplete report submission status, and will therefore, affect a Participant's Customer Satisfaction Index score.

9-3.1.3.2.   Negative Reports. [old D9-3]

Participants are required to submit a negative report even if a shipment was not billed or if a claim was not settled during the quarter. The Participant will be considered non responsive if it doesn't file either report and will be subject to HTOS 9-3.1.3.3.

9-3.1.3.3.   Failure To Submit Reports. [old D9-3]

Failure to submit either the claims settlement or shipment reports in two consecutive quarters and/or three of four quarters will result in the withdrawal of a Participant's rates and/or subsequent revocation of its approval. Failure to submit one of four quarters of either the shipment and/or claim reports will result in an incomplete report submission status, and will affect a Participant's Customer Satisfaction Index score.

9-3.1.4. Industrial Funding Fee

The total number of household shipments reported in HTOS Paragraph 9-3.1.2. must be equally dividable by the Industrial Funding Fee (IFF) amount, as identified in the Request for Offers. In the event the number of shipments reported cannot be divided equally by the IFF amount, the Participant will be responsible for verifying the deficiency to the PMO. Any deficiencies found will be handled in accordance with HTOS Paragraph 9-3.1.4.1. and 9-3.1.4.2.

9-3.1.4.1.   Industrial Funding Fee Deficiencies.

In the event deficiencies are found in the IFF amounts submitted to GSA, the PMO will notify the Participant in writing of the existing deficiency. The Participant will be given an opportunity to correct the noted deficiency.

9-3.1.4.2. Correction of Deficiencies in IFF.

Failure to acknowledge or correct deficiencies after notification by the PMO will result in the PMO placing the Participant in a temporary non-use status, in accordance with procedures in Federal Property Management Regulation (FPMR) Part 101-40. The PMO is authorized to refer a Participant for suspension or debarment.

9-3.1.4.3. Failure To Submit IFF.

Failure to submit the Industrial Funding Fee due GSA for household goods shipments handled, will result in immediate placement of the Participant in temporary non-use status pending revocation of the Participant's approval, in accordance with DTOS 7-1.C., and ITOS 7.1.12.4., Failure to Submit Remittance.

9-3.1.5. Filing Requirements.

9-3.1.5.1. Hard Copy Reports. [old D9-3]

Hard copy (paper) reports will not be accepted. In those instances where hard copy reports are submitted to the PMO, it will be considered the same as a failure to submit reports and handled in accordance with HTOS Paragraph 9-3.1.3.3.

9-3.1.6. Report Format Requirements.

9-3.1.6.1. General.

The claims settlement and shipment reports specified above shall meet the requirements set out in this paragraph.

9-3.1.6.2. Consolidated Reports.

In no instance shall any combination of shipment reports (domestic or international) and claim reports (domestic or international) be consolidated. Each report must be separate, with a separate header and filename.

9-3.1.6.3. Electronic Media Reports.

9-3.1.6.3.1. Schedule for Submission.

Electronic media reports must be submitted in accordance with the following requirements. Electronic media reports must be transmitted between the dates indicated below of each calendar year:

Quarter	Months	Submission
1st	Jan - March	April 1 thru May 31
2nd	April - June	July 1 thru August 31
3rd	July - Sept	Oct 1 thru Nov 30
4th	Oct - Dec	Jan 1 thru Feb 28 (29)

9-3.2. Claim Settlement and Shipment Report Format Requirements. [old D9-7]

Format requirements, as set out below, must be adhered to. Submissions received from Participants or services not conforming to the record requirements will be unacceptable and not incorporated in the database. Submissions received from Participants or filing services not conforming to the report formatting specifications will be rejected. **The below listed formatting requirements for the submission of shipment and claim reports will be in effect for all reports filed for 3rd Quarter Calendar Year 1999.**

9-3.2.1. Line 1: Report Header.

This line is the Header Record providing information about the Participant report. The Header Record is position sensitive. Positions marked with an asterisk (*) are numeric and must, if necessary, be zero filled from the left (i.e., 00250).

	Field	Required Positions	Record Position(s)	Contents
	Header ID	1	1	Must be **S** for Shipment files, **C** for Claim files.
	Field Delimiter	1	2	Comma
	SCAC	4	3-6	Four (4) digit Standard Carrier Alpha Code. Identify the SCAC for the carrier the GBL was issued to.
	Field Delimiter	1	7	Comma
	Type of Transportation	2	8-9	Enter **GD** for General Domestic, **GI** for General International, **DD** for Direct Domestic Move Management, **DI** for Direct International, **BD** for Broker Domestic Move Management, or **BI** for Broker International. ****Please note**

					that if you provide multiple services within CHAMP, you must create separate reports (files) for each type of service provided.
	Field Delimiter	1	10		Comma
*	Number of Records	4	11-14		Number of records transmitted. This identifies the number of lines submitted in the shipment report. Example: 0321= 321 records. **If this is a Negative report, use all zeros.**
	Field Delimiter	1	15		Comma
	Identifying Quarter	5	16-20		YYYYQ - Complete year with the calendar quarter number, where Q = calendar quarter as referenced in file naming above. Example: 19993 = third quarter of 1999

Examples:

 (1) 50 General Domestic Shipments for January-March, 1999:   S,GSAA,GD,0050,19991
 (2) 101 Broker International Shipments for July-September, 2000:   S,GSAA,BI,0101,20003
 (3) 20 General International Claims for April-June, 1999:   C,GSAA,GI,0020,19992
 (4) 87 Broker Domestic Claims for October-December, 2000:   C,GSAA,BD,0087,20004
 (5) Negative General Domestic Shipment Report for April-June: S, GSAA,GD,0000,19992
 (6) Negative General Domestic Claim Report for April-June: C,GSAA,GD,0000,19992

9-3.2.2. Line 2: Detail Records.

9-3.2.2.1.   General.

   Information on claims and shipments. Line 2 and each line thereafter will identify individual shipment records. For illustration purposes, claim and shipment formats are shown separately.

9-3.2.2.2.   Shipment Report Spreadsheet Format.

Entry format is text entry (i.e. left aligned). Fields marked with an asterisk (*) are numeric and must, if necessary, be zero filled from the left (i.e., 00250 for 250) depending on the field size. Save the file as a comma-separated file (.CSV) then rename as necessary (.SHP or .ERS).

	Field	Required Positions	Record Position(s)	Contents
	Record ID	1	1	Must be **S**
	Field Delimiter	1	2	Comma
	SCAC	4	3-6	Four (4) digit Standard Carrier Alpha Code Identify the SCAC for the carrier the GBL was issued to.
	Field Delimiter	1	7	Comma
	Type of Transportation	2	8-9	Enter **GD** for General Domestic, **GI** for General International, **DD** for Direct Domestic Move Management, **DI** for Direct International, **BD** for Broker Domestic Move Management, or **BI** for Broker International.
	Field Delimiter	1	10	Comma
	Type of Move	3	11-13	If the GBL was used for household goods, put in HHG; for Automobile, put in POV; for Unaccompanied Air Baggage, put in UAB. **If multiple elements were moved using one GBL, each element must have an individual shipment record.
	Field Delimiter	1	14	Comma
	Federal Agency Identification Code	9	15-23	Agency's 9 digit User ID code used to access ITMS. This User ID can be obtained directly from the using agency or from the ITMS system itself. If unable to obtain the proper User ID, please contact the PMO. **Records with this field blank. X or zero-filled will not be accepted.**
	Field Delimiter	1	24	Comma
	Carrier	15	25-39	Carrier reference number used when the shipment was

	Reference Number			booked by the carrier. Start the reference number with position 25. If reference number does not consist of 15 numbers, place X's after number to fill out the 15 positions. Example: Reference number 135895 would appear as 135895XXXXXXXXX. **Records with this field blank, X or zero filled will not be accepted.**
	Field Delimiter	1	40	Comma
	Billing Date	8	41-48	Date of Agency Billing (YYYYMMDD)
	Field Delimiter	1	49	Comma
	BL Number	8	50-57	Bill of Lading Number. Use GBL number **OR** commercial bill of lading (CBL) number that was used to handle the shipment. If CBL number is less then 8 characters, place X's after the number to fill in field. **Records with this field blank or zero filled will not be accepted.**
	Field Delimiter	1	58	Comma
	Type of GBL	1	59	**Input V if Virtual GBL was used. Input G if standard GBL was used.**
	Field Delimiter	1	60	Comma
	Pickup Date	8	61-68	YYYYMMDD (19980215 = February 15, 1998)
	Field Delimiter	1	69	Comma
	Delivery Date	8	70-77	YYYYMMDD (see Pickup Date)
	Field Delimiter	1	78	Comma
*	Transit Time	3	79-81	Actual Transit Times in days Example: 007 = 7 days
	Field Delimiter	1	82	Comma
	Origin State or Country Code	4	83-86	Four digit state or country identifier. State is the two digit state identifier, all CAPS, plus two (2) zeros (0) Example: FL00. Country code is the four-digit country code as listed in the most current Request For Offers. Example: Germany = 3940 **Records with this field blank, X or zero filled will not be accepted.**
	Field Delimiter	1	87	Comma
	Origin Zip Code	5	88-92	5-digit zip (X Fill for Canada or International Shipments)
	Field Delimiter	1	93	Comma
	Destination State or Country Code	4	94-97	See Origin State above. **Records with this field blank, X or zero filled will not be accepted.**
	Field Delimiter	1	98	Comma
	Destination Zip Code	5	99-103	5-digit zip (X Fill for Canada or International Shipments)
	Field Delimiter	1	104	Comma
*	Actual Weight Shipped	5	105-109	In pounds for HHG or UAB. Example: 09800 = 9800 pounds. If the record is for POV, place five (5) zeros, 00000 **If field is zero filled for POV, positions 11-13 must state POV
	Field Delimiter	1	110	Comma
*	Mileage	4	111-114	Whole miles only. Example: 0750 = 750 miles**. This field should be zero filled for International moves.**
	Field Delimiter	1	115	Comma
*	Transportation Charge	5	116-120	Exclusive of SIT charges, in whole dollars only. Example: 07600 = $7,600.00
	Field Delimiter	1	121	Comma
	Employee's Last Name	15	122-136	Last name of the employee listed on the GBL in all CAPS. If the employee's name does not consist of 15 letters, place X's

				after the name to fill out the 15 positions. Example: The name of Jones would appear as JONESXXXXXXXXXX. **Records with this field blank, X or zero filled will not be accepted**.
	Field Delimiter	1	137	Comma
	Participants Tax ID Number	9	138-146	Participant TIN

Examples:

(1) Domestic:

A	B	C	D	E	F	G	H	I	J	K	L
S	GSAA	GD	HHG	RXPG8TY43	Q794912349XXXXX	19990612	S12345XX	V	19990105	19990312	007

M	N	O	P	Q	R	S	T		U
MO00	64131	OK00	71222	10030	0400	03800	SMITH-BATTSONXX		103777444

(2) International:

A	B	C	D	E	F	G	H	I	J	K	L
S	GSAA	GI	POV	RXPG8TY43	Q794-P912666XXX	19991012	PP123456	G	19990601	19990724	053

M	N	O	P	Q	R	S	T		U
MO00	64131	490J	XXXXX	00000	0000	03800	SMITH-BATTSONXX		103777444

9-3.2.2.3. State Codes (CONUS) for use in Shipment Origin/Destination.

STATE	CODE	STATE	CODE
ALABAMA	AL00	MISSOURI	MO00
ALASKA	See Table Below.	MONTANA	MT00
		NEBRASKA	NE00
ARIZONA	AZ00	NEVADA	NV00
ARKANSAS	AR00	NEW HAMPSHIRE	NH00
CALIFORNIA	CA00	NEW JERSEY	NJ00
COLORADO	CO00	NEW MEXICO	NM00
CONNECTICUT	CT00	NEW YORK	NY00
DELAWARE	DE00	NORTH CAROLINA	NC00
DISTRICT OF COLUMBIA	DC00	NORTH DAKOTA	ND00
FLORIDA	FL00	OHIO	OH00
GEORGIA	GA00	OKLAHOMA	OK00
IDAHO	ID00	OREGON	OR00
ILLINOIS	IL00	PENNSYLVANIA	PA00
INDIANA	IN00	RHODE ISLAND	RI00
IOWA	IA00	SOUTH CAROLINA	SC00
KANSAS	KS00	SOUTH DAKOTA	SD00
KENTUCKY	KY00	TENNESSEE	TN00
LOUISIANA	LA00	TEXAS	TX00
MAINE	ME00	UTAH	UT00
MARYLAND	MD00	VERMONT	VT00
MASSACHUSETTS	MA00	VIRGINIA	VA00
MICHIGAN	MI00	WASHINGTON	WA00
MINNESOTA	MN00	WEST VIRGINIA	WV00
MISSISSIPPI	MS00	WISCONSIN	WI00
		WYOMING	WY00

ALASKAN POINTS	CODE
ANCHORAGE	AN00
CORDOVA	CV00
FAIRBANKS	FB00
JUNEAU	JN00
KETCHICAN	KN00
KODIAK	KD00
PETERSBURB	PB00
SITKA	SA00
WRANGELL	WG00

Note: See the International table for the code for the Hawaiian Islands, Puerto Rico, Guam and Virgin Islands.

9-3.2.2.4. Canadian Provincial Codes for use in Shipment Origin/Destination.

PROVINCE	CODE			
ALBERTA	AB00		NORTHWEST TERRITORIES	NT00
BRITISH COLUMBIA	BC00		NOVA SCOTIA	NS00
LABRADOR	LB00		ONTARIO	ON00
MANITOBA	MB00		PRINCE EDWARD ISLAND	PE00
NEW BRUNSWICK	NB00		QUEBEC	PQ00
NEWFOUNDLAND	NF00		SASKATCHEWAN	SK00
			YUKON	YT00

9-3.2.2.5. Country Codes for use in Shipment Origin/Destination.

COUNTRY	CODE		COUNTRY	CODE
ALBANIA	120A		CENTRAL AFRICAN REPUBLIC	2690
ALGERIA	1250		CHAD	2730
AMERICAN SAMOA	060A		CHILE	2750
ANGOLA	1410		CHINA	2800
ANTIGUA	1490		COLOMBIA	2850
ARGENTINA	150A		COSTA RICA	2950
AUSTRAILIA	160A		CROATIA	4400
AUSTRIA	1650		CUBA	3000
AZORES	735A		CYPRUS	3050
BAHAMAS	1800		CZECHOSLOVAKIA	3100
BAHRAIN	1810		DENMARK	3150
BANGLADESH	1820		DJIBOUTI	3170
BARBADOS	1840		DOMINICAN REPUBLIC	3200
BELGIUM	1900		ECUADOR	3250
BELIZE	2270		EGYPT	9220
BERMUDA	1950		EL SALVADOR	3300
BOLIVIA	2050		ENGLAND	925E
BOTSWANA	2100		ETHIOPIA	3350
BRAZIL	220A		FIJI	3380
BRUNEI	2320		FINLAND	3400
BULGARIA	2450		FRANCE	3500
BURKINA FASO	9270		GABON	3880
BURMA	2500		GERMANY	3940
BURUNDI	2520		GHANA	3960
CAMBODIA	2550		GREECE	4000
CAMEROON	2570		GUADELOUPE	4070
CANARY ISLANDS	830C		GUAM	170G
CAYMEN ISLANDS	2680		GUATEMALA	4150
			GUINEA	4170

GUYANA	4180		PAPUA NEW GUINEA	7120
HAITI	4200		PARAGUAY	7150
HAWAIIAN ISLANDS OF HAWAII, KAUAI, MAUI, OAHU	210H		PERU	7200
			PHILIPPINES	7250
HONDURAS	4300		POLAND	7300
HONG KONG	4350		PORTUGAL	7350
HUNGARY	4450		PUERTO RICO	180P
ICELAND	4500		QATAR	7470
INDIA	4550		ROMANIA	7550
INDONESIA	4580		RUSSIA	8250
IRELAND	4700		SAIPAN	069S
ISRAEL	4750		SAUDI ARABIA	7850
ITALY	4800		SCOTLAND	925S
IVORY COAST	4850		SENEGAL	7870
JAMAICA	4870		SIERRA LEONE	7900
JAPAN	490J		SINGAPORE	7950
JORDAN	5000		SLOVENIA	7890
KAZAKHSTAN	5250		SOLOMON ISLANDS	789S
KENYA	5050		SOUTH AFRICA	8010
KOREA (SOUTH)	5150		SPAIN	8300
KUWAIT	5200		SRI LANKA	2720
LAOS	5300		SUDAN	8350
LEBANON	5400		SURINAME	8400
LITHUANIA	5420		SWEDEN	8500
LUXEMBOURG	5700		SWITZERLAND	8550
MADAGASCAR	5750		SYRIA	8580
MALAWI	5770		TAHITI	350T
MALAYSIA	5800		TAIWAN	2810
MALI	5850		TANZANIA	8650
MALTA	5900		THAILAND	8750
MARINAS ISLAND	591M		TRINIDAD	205T
MAURITANIA	5920		TUNISIA	8900
MAURITIUS	5930		TURKEY	9050
MEXICO	5950		UGANDA	9100
MICRONESIA	0630		UKRAINE	9280
MONACO	6070		UNITED ARAB EMIRATE	8880
MOROCCO	6100		URUGUAY	9300
MOZAMBIQUE	6150		VENEZUELA	9400
NAMIBIA	8210		VIETNAM	9450
NEPAL	6250		VIRGIN ISLANDS OF ST. THOMAS & ST. CROIX	190V
NETHERLANDS	6300			
NETHERLANDS ANTILLES	6400		VIRGIN ISLANDS OF ST. JOHN	200V
NEW ZEALAND	6600		WESTERN SAMOA	9630
NICARAGUA	6650		YEMEN	9650
NIGERIA	6700		YUGOSLAVIA	9700
NORTHERN IRELAND	925I		ZAIRE	2910
NORTHERN MARIANA ISLANDS	0690		ZAMBIA	9900
NORWAY	6850		ZIMBABWE	8180
OKINAWA	490K			
OMAN	6160			
PAKISTAN	7000			
PANAMA	7100			

9-3.2.2.6. Claim Settlement Spreadsheet Format.

Entry format is text entry (i.e. left aligned). Fields marked with an asterisk (*) are numeric and must, if necessary, be zero filled from the left (i.e., 00250 for 250) depending on the field size. Line 2 and each line thereafter will identify individual claim records.

	Field	Required Positions	Record Position(s)	Contents
	Record ID	1	1	Must be **C**
	Field Delimiter	1	2	Comma
	SCAC	4	3-6	Four (4) digit Standard Carrier Alpha Code. Identify the SCAC for the carrier the GBL was issued to.
	Field Delimiter	1	7	Comma
	Type of Transportation	2	8-9	Enter **GD** for General Domestic, **GI** for General International, **DD** for Direct Domestic Move Management, **DI** for Direct International, **BD** for Broker Domestic Move Management, or **BI** for Broker International.
	Field Delimiter	1	10	Comma
	Type of Move	3	11-13	If multiple elements were moved using one GBL, each element must have an individual shipment record; if the GBL was used for household goods, put in HHG; for Automobile, enter POV; and for Unaccompanied Air Baggage, enter UAB. **If multiple elements were moved using one GBL, each element must have an individual shipment record.
	Field Delimiter	1	14	Comma
	Federal Agency Identification Code	9	15-23	Agency's 9 digit User ID code used to access ITMS. This User ID can be obtained directly from the using agency or from the ITMS system itself. If unable to obtain the proper User ID, please contact the PMO. **Records with this field blank, X or zero-filled will not be accepted.**
	Field Delimiter	1	24	Comma
	Carrier Reference Number	15	25-39	Carrier reference number used when the shipment was booked by the carrier. Start the reference number with position 25. If reference number does not consist of 15 numbers, place X's after number to fill out the 15 positions. Example: Reference number 135895 would appear as 135895XXXXXXXXX. **Records with this field blank, X or zero filled will not be accepted.**
	Field Delimiter	1	40	Comma
	BL Number	8	41-48	Bill of Lading Number. Use GBL number **OR** commercial bill of lading (CBL) number that was used to handle the shipment. If CBL number is less then 8 characters, place X's after the number to fill in field. **Records with this field blank or zero filled will not be accepted.**
	Field Delimiter	1	49	Comma
	Type of GBL	1	50	**Input V if Virtual GBL was used. Input G if standard GBL was used.**
	Field Delimiter	1	51	Comma
	Date Claim Received	8	52-59	YYYYMMDD (19990315 = March 15, 1999).
	Field Delimiter	1	60	Comma
	Date Claim Settled	8	61-68	YYYYMMDD (see claim received date)

	Field Delimiter	1	69	Comma
*	Days to settle	3	70-72	Number of days, excluding day of receipt, but including the settlement date. Example: 010 = 10 Days
	Field Delimiter	1	73	Comma
*	Amount Claimed	6	74-79	Whole dollars only Example: 000500 = $500.00
	Field Delimiter	1	80	Comma
*	Amount Settled	6	81-86	Whole dollars only. Example: 000250 = $250.00
	Field Delimiter	1	87	Comma
	Settlement Delay Codes	30	88-117	If days to settle exceeds 60, use the codes specified below in the Delay Code Specification. If codes are used, place them starting in position 81. Once all codes are loaded, place X's to fill out the 30 positions. Example: C99C11C12XXXXXXXXXXXXXXXXXXXXX If no codes are used X fill the 30 positions.
	Field Delimiter	1	118	Comma
	Employee's Last Name	15	119-133	Last name of the employee listed on the GBL in all CAPS. If the employee's name does not consist of 15 letters, place X's after the name to fill out the 15 positions. Example: The name of Jones would appear as JONESXXXXXXXXXX. **Records with this field blank, X or zero filled will not be accepted**.
	Field Delimiter	1	134	Comma
	Participants Tax ID Number	9	135-143	Participant TIN

Example:

Columns

A	B	C	D	E	F	G	H	I	J	K	L
C	GSAA	GI	POV	RXPG8TY43	Q794-P912666XXX	PP123456	G	19990601	19990622	021	002300

M	N	O	P
001600	Z99C12P13XXXXXXXXXXXXXXXXXXXXX	O'TOOLEXXXXXXXX	123456722

9-3.2.2.7.   Claim Settlement Delay Code Specifications. [old D9-7]

Codes beginning with a "C" apply specifically to reasons for a late settlement because of a Participant's act or omission; codes beginning with a "P" apply specifically to reasons for a late settlement because of a property owner's act or omission. Codes "C99," "P99," and "Z99" are used to indicate a group of reasons for a late settlement; see below for additional information. Except as otherwise specified, the Delay Codes must begin in position 81.

9-3.2.2.7.1.   Delay Code C99.

Indicates that because of a combination of Participant failures, as indicated by the following Participant codes, settlement was delayed past 60 days. If this code is used, it must begin in position 81 with the specific codes following it, e.g., C99C12C13. Do not use for an 'other' or 'unknown' indication. Do not use by itself or with only one other code (Example: C99 or C99C12).

9-3.2.2.7.2.   Delay Code C11.

Participant Failure: Indicates that the Participant through administrative error failed to make a settlement offer within 60 days.

9-3.2.2.7.3.   Delay Code C12.

Adjuster Failure: Indicates that the adjuster hired by the Participant failed to complete review and settlement action within 60 days or to provide the Participant with its report so that the Participant could complete settlement within 60 days. If the adjuster's failure was based on inability to meet with the property owner, use Delay Code P12.

9-3.2.2.7.4.   Delay Code C13.

Repair Estimates: Indicates that the Participant failed to obtain estimates of repair in sufficient time to make a settlement offer within 60 days (see DTOS Paragraph 10-2 for the requirement that the Participant obtain repair estimates). If the failure to obtain timely repair estimates was based on the inability of the repair firm to meet with the property owner, use Delay Code P13.

9-3.2.2.7.5.   Delay Code C14.

RESERVED.

9-3.2.2.7.6.   Delay Code C15.

RESERVED

9-3.2.2.8.   Property owner codes. [old D9-7]

9-3.2.2.8.1.   Delay Code P99.

Indicates that because of a combination of property owner failures, as indicated by the following property owner codes, settlement was delayed past 60 days. If this code is used, it must begin in position 81 with the specific codes following it, e.g., P99P12P14. Do not use for an 'other' or 'unknown' indication. Do not use by itself or with only one other code (Example: P99 or P99P12).

9-3.2.2.8.2.   Delay Code P11.

Insufficient information: Indicates that the information on or submitted with the claim was insufficient for the Participant to make a settlement and that despite the Participant's timely request for such information, the information was not returned to the Participant in sufficient time for allow for settlement within 60 days. Such information includes additional descriptions of the property or copies of purchase receipts; it does not include estimates of repair (see Delay Codes C13 and P13), high value article appraisals (see Delay Code P14).

9-3.2.2.8.3.   Delay Code P12.

Adjuster Failure: Indicates that the property owner was unable to meet with the Participant's adjuster in sufficient time for the adjuster to complete review and settlement action within 60 days or to provide the Participant with its report so that the Participant could complete settlement within 60 days.

9-3.2.2.8.4.   Delay Code P13.

Repair Estimates: Indicates that the property owner was unable to meet with the Participant's repair firm in sufficient time for the firm to complete review and settlement action within 60 days or to provide the Participant with its report so that the Participant could complete settlement within 60 days. This code may also be used to indicate that the employee declined use of the Participant's repair firm, but failed to provide the Participant with repair estimates in sufficient time for the Participant to complete settlement within 60 days.

9-3.2.2.8.5.   Delay Code P14.

Appraisals: Indicates that despite a timely request from the Participant, the property owner failed to provide the Participant high value article appraisals when such appraisals are warranted by the nature of the property (such as antiques or art objects) in sufficient time for the Participant to complete settlement within 60 days.

9-3.2.2.8.6.   Delay Code P15.

RESERVED.

9-3.2.2.9.   Combination code. [old D9-7]

9-3.2.2.9.1.   Delay Code Z99.

Indicates that because of a combination of Participant and property owner failures, settlement was delayed past 60 days. If this code is used, it must begin in position 81 with the specific codes following it, e.g., Z99C12P14. Do not use for an 'other' or 'unknown' indication. Do not use by itself or with codes for only one other type (Example: Z99 or Z99C12).

9-3.3. Claim Settlement and Shipment Report Submission Requirements.

9-3.3.1. Electronic Submission. [old D9-8]

Reports must be submitted electronically by Internet FTP. Hard copy (paper) reports will not be accepted. Submissions received from Participants or filing services not conforming to the report submission specifications will be rejected.

9-3.3.2. File Naming Convention.

Implementation of the Interagency Transportation Management System (ITMS) has created the need for the development of a File Naming Convention. This File Naming Convention applies to quarterly shipment and claim reports submitted to the PMO. The File Naming Convention identified below must be adhered to. Failure to do so will result in an incomplete status of shipment and/or claim report submission. File names must be eight (8) characters, and the file extension will reflect the record type (Shipment/Claim).

Field	Required Positions	Record Position(s)	Contents
Carrier Code	4	1-4	Four (4) digit Standard Carrier Alpha Code
Year	1	5	Last digit of calendar year (1999 would be **9**)
Quarter	1	6	Calendar quarter, e.g., 1=Jan-Mar, 2=Apr-Jun, 3=Jul-Sep, 4=Oct-Dec
File Type	1	7	Designates the type of transportation the file contains. General Domestic = **A**, General International = **B**, Direct Move Management Domestic = **C**, Direct Move Management International = **D**, Broker Move Management Domestic = **E**, Broker Move Management International = **F**.
Report Type	1	8	Report Submission Number (i.e. first submission of original quarterly report =1; corrected error report submission=2).
File Extension	3	9-11	**Shipments:** Original submission must be **.SHP**; the correction report submitted requires an **.ERS** extension. **Claims:** Original submission must be **.CLM**; the correction report submitted requires an **.ERC** extension.

Example: Original Shipment Report Submission

GSAA93A1.shp	
GSAA	Carrier Code
9	Last Digit of Calendar Year
3	Calendar Quarter
A	File Type
1	Report Type
.SHP	File Extension

Example: Corrected Shipment Repot Submission

GSAA93A2.shp	
GSAA	Carrier Code
9	Last Digit of Calendar Year
3	Calendar Quarter
A	File Type
2	Report Type
.ERS	File Extension

Example: Original Claim Report Submission

GSAA93A1.clm	
GSAA	Carrier Code
9	Last Digit of Calendar Year
3	Calendar Quarter
A	File Type
1	Report Type

.CLM	File Extension

Example: Corrected Claim Repot Submission

GSAA93A2.clm	
GSAA	Carrier Code
9	Last Digit of Calendar Year
3	Calendar Quarter
A	File Type
2	Report Type
.ERC	File Extension

If you have several files to transmit at one time, each file name must be unique (i.e., GSAA93B1.SHP, GSAA93A1.CLM, GSAA93A2.ERS, etc.).

9-4. Electronic Report Submission Instructions.

9-4.1. General.

Claim and shipment reports must be submitted via the Internet using the File Transfer Protocol (I-FTP) and must meet the transmission requirements defined below. Hard copy (paper) reports are not acceptable. If your firm has never submitted reports electronically to the General Service Administration (GSA) and intends to directly transmit the required reports via I-FTP instead of using a filing service, your firm will need to contact the Program Management Office (PMO) in writing on company letterhead to receive a user ID and password. A FACSIMILE request is acceptable.

9-4.2. Format.

Format requirements as set out in HTOS Paragraph 9-3.2 of this Section must be adhered to and must be via the Internet using the File Transfer Protocol (I-FTP). Submissions received from Participants or services not conforming to the record requirements will be unacceptable and not incorporated in the database.

9-4.3. File Preparation.

In order to transfer the file(s) via the I-FTP the file must be transmitted as unformatted ASCII (TEXT ONLY) flat file, (i.e., no tab characters, etc.). The file must not have a top, bottom, or left margin, pagefeeds, or embedded blank records (Note: The type of software you will be using will determine what must be done to prepare the file for transmission). GSA suggests using "File → Save As → Text Document" to prevent saving any formatting along with the text. Be sure to change the .TXT file extension to the required one after saving the text file.

9-4.4. Accessing the I-FTP.

GSA is unable to provide specific instructions on how to access the I-FTP, how to upload a file onto the I-FTP, how to download a file from the I-FTP, or how to move around in the I-FTP due to the fact that accessing and operating within the I-FTP are dependent upon the type of Internet software used. Consequently, a firm will need to contact its I-FTP provider for assistance. The information listed below provides the (1) address to GSA's I-FTP directory and (2) two different methods (there are others) of accessing a firm's individual directory in which the firm's shipment and/or claim reports will need to be uploaded.

9-4.4.1. User ID and Password

(See HTOS Paragraph 9-4.1.)

9-4.4.2. I-FTP Address

Kcftp.gsa.gov

9-4.4.3. Directory Access.

Methods of accessing individual directories (i.e., item in **bold** are words/phrases THAT YOU MUST TYPE IN EXACTLY)

FTP>CD CARRIERS/USER ID

or

FTP>D:\PUB\CARRIERS\USER ID

9-4.4.4. Verification of file transfer.

Once you have transmitted a file onto the I-FTP within your firm's assigned directory, you can follow the steps identified below to verify that your firm's file was successfully transmitted onto the I-FTP.

1. Exit I-FTP;
2. Re-connect to I-FTP;
3. Enter your firm's assigned User ID and Password when requested;
4. Change to your firm's directory --

   FTP>CD CARRIERS/USER ID

   or

   FTP>PUB:\PUB\CARRIERS\USER ID; and
5. Type **DIR**.

At this point you should be able to see your firm's file identified in your assigned directory. If the file doesn't appear, you will need to "Upload" the file to the I-FTP again. The steps identified above will assist you only in verifying that your firm's claim and/or shipment report(s) file was transferred successfully onto the I-FTP. Following these steps WILL NOT verify that the contents of your firm's reports have been formatted correctly--only that GSA has received a file.

9-4.5. Reorganizations and Bankruptcies Reports.

9-4.5.1. Reorganization Report. [old D9-9]

The Participant shall furnish a copy of the court approved reorganization plan to the PMO within the timeframe specified in Section 5 of the DTOS or ITOS.

9-4.5.2. Bankruptcy Report. [old D9-9]

The Participant shall furnish a copy of the bankruptcy judgment to the PMO within the timeframe specified in Section 5 of this HTOS. The Participant shall also provide a listing of all shipments handled pursuant to this HTOS in its possession, in transit, or in SIT, and shall notify agencies of the bankruptcy. The shipment listing shall identify the name of the Federal agency and the property owner, the location of the shipment, and the telephone number of the SIT facility, if the shipment is in SIT. In the event the shipment is in transit, the Participant shall also advise the Federal agency of the Participant's plans for disposition of the shipment. The Participant shall also notify those Federal agencies that have booked shipments but which have not yet been picked up.

9-5. Reports by the PMO.

9-5.1. Performance Reports.

9-5.1.1. Performance Reports (Quarterly). [old D9-6]

The PMO shall furnish Participants a performance report. The report will be furnished to the Participant on a calendar quarter basis, and shall either contain information derived from GSA Forms 3080 received during the previous quarter pertaining to shipments handled by the Participant or consist of copies of the GSA Forms 3080 received during the previous quarter.

9-5.1.2. Performance Reports (Annual). [old D9-6]

The PMO shall publish an annual report based upon information from GSA Forms 3080 received during the previous calendar year and such other information as the PMO deems appropriate.